✓	☐ Failed ☐ Closed ☐ IHH State of Maine Health Inspection Report Page 1 of 6 Critical Violations 6 Date 7/29/2019																			
				C	ritica	al Vic	olatio	ons				6	Date		7/29/2					
		shment Na		AS Additionized by Ez Millon & 2400	Non-Critical Violations							5	Time		1:45 F					
5F	EA	KERS SN/	ACK SHACK & VARIE	14	ertif	ed F	ood	Prot	tectior	n Manager		Υ Time Out		4:00 F	<u> </u>					
Lic	ens	e Expiry Da	te/EST. ID#	Address	City						Zip Code		Tele	phone						
10/9/2019 / 7156 29 SPRUCE ST						LE	WIS	STO	NC		04240-731	19	207-786-2529							
License Type Owner Name						Purpose of Inspection License						ted	F	Risk Cate	gory					
MUN - EATING PLACE SPEAKER, WILLIAM & PATE						Re	egul	lar			Yes	3								
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS																				
														_						
		_	•	(IN, OUT, N/O, N/A) for each number						Mark"X" in appropr										
	IIN:	=in complian	ice OUT=not in complia	nce N/O=not observed N/A=no	ot app	licab	е 			COS=corrected on-site	during inspecti	ion	H=r	repeat vio	nation					
Compliance Status Compliance Status												cos R								
				upervision	_		16	Potentially Hazardous Food Time/Temperature IN Proper cooking time & temperatures												
1		IN	PIC present, demonstra performs duties	ates knowledge, and			17		IN					Idina		+				
				loyee Health			18		IN	p				iuiig						
2		IN	Management awarenes			П	19	_	IN							+				
3		IN		g, restriction & exclusion		Щ	20		OU						-+	\dashv				
4		IN		jienic Practices	Ŧ	H	21		IN							\dashv				
5		N Proper eating, tasting, drinking, or tobacco use N No discharge from eyes, nose, and mouth					22		IN					ıres & re	cord					
				mination by Hands			Consumer Advisor													
6		IN	Hands clean & properly	y washed			23		IN	Consumer advi		d for ra	aw or							
7		4.0	No bare hand contact v	bare hand contact with RTE foods or approved			23		IIN	undercooked for	oods									
Ш		OUT	alternate method prope	erly followed		Ш				Highly Susce	ptible Popula	tions								
8		IN Adequate handwashing facilities supplied & accessible					24		IN	Pasteurized for	ods used; pro	hibited	d food	ls not						
			Approv	red Source						offered	Ohamiaal									
9		IN	Food obtained from app	proved source		Ш	25		IN		Chemical			1	Т					
10		IN	Food received at prope	er temperature		Ш	26								224	-				
11		IN	Food in good condition	, safe, & unadulterated		Ш			IN					orea & u	sea					
12		IN	Required records avail	able: shellstock tags						Conformance with						_				
Ш			parasite destruction			Ц	27		IN	Compliance wi	th variance, s	special	ized p	orocess,	is,					
				om Contamination	_	\blacksquare	ᆜ			Ta Thoof plan										
13 14		IN OUT	Food separated & prote		+	Н		Ris	sk Facto	ors are improper prac	ctices or proced	dures id	lentifie	ed as the n	nost					
10 11 11 11 11 11					+	Н		pre	evalent	t contributing factors of f	foodborne illne	ss or ii	njury. F	Public He	alth					
15		IN	reconditioned, & unsaf				L	Inte	erventi	ions are control measure	s to prevent fo	odborr	ne illne	ess or inju	ury.					
				GOOD R	FTA	II F	PRA	CT	ICES	3										
			Good Retail Practices are	preventative measures to control the a				_			cts into foods.									
Ma	rk ")	(" in box if n	umbered item is not in com	ppliance Mark "X" in appropriate	box f	or CC)S an	nd/or	r R	COS=corrected on-site	e durina inspec	tion	R=re	epeat viola	ation					
				,a	cos		T							.,,		cos R				
			Safe Food and	Water	1000					Dropor I la	o of I Itomoilo									
20	INI	Postouriza			_	П	44	Liki	I		e of Utensils									
28 N Pasteurized eggs used where required 29 N Water & ice from approved source				-	H	-	IN	+	se utensils: properly sto			ماسام ما	1 0 hand	llad	+					
$\boldsymbol{\vdash}$	0 IN Variance obtained for specialized processing methods			+	\vdash	42	IN X	+	nsils, equipment, & line le-use & single-service					ieu	+					
30	n N	, a. iaiioo (Food Temperature (_	Н	44	-		res used properly	ai ucies: pro	periy S	torea	a useu		+				
		Proper co	oling methods used; ade		_		77	1114	TOIOV	Utensils, Equip	ment and Ven	dina								
31	IN	temperatu	•	quate equipment to				Ī.:	Food	d & non-food contact su					T					
32	IN	<u> </u>	properly cooked for hot	holding	\top	Н	45	X		perly designed, constru					- 1					
-	IN		thawing methods used		\top	Н	46 IN Warewashing facilities: installed, maint					ined. 8	& used	d; test sti	rips	\top				
34 IN Thermometers provided and accurate					T	П	47 X Non-food contact surfaces clean								\top					
			Food Identificati						_	Physic	al Facilities									
35	IN	Food prop	erly labeled; original con		T	48 IN Hot & cold water available; adequate pressure								T	T					
			Prevention of Food Conf	tamination			49	IN	_	nbing installed; proper										
36	Х	Insects, ro	dents, & animals not pro	esent	Т	П	50 IN Sewage & waste water properly disposed													
	IN		•	ood preparation, storage & display	1	П	51	IN	+	et facilities: properly co			l, & cl	eaned		\top				
37 38	IN		leanliness			П	52	IN	_	bage & refuse properly		-								
$\overline{}$	IN		ths: properly used & sto	red	T	П	53	Х	_	sical facilities installed,					一	х				
40 IN Washing fruits & vegetables 54 X Adequate ventilation & lighting; designated areas used									х											
Г				Atomica as			_			<u> </u>	-									
Por	enn	in Charge /	Signature\	ONDER PROPERTY VI							Date:	7/29/2	019							
	Person in Charge (Signature) Health Inspector (Signature)										2410.		.							
		LACHANCE		Dar La	2,5-4				_F	Follow-up: YES	□NO Da	ate of F	ollow	v-up: 8/9	9/2019					
L	J.0	0.,,,,,,	-							- <u>-</u>				-						

	Page 2 of 6										
Establishment Name SPEAKERS SNACK SHACK & VARI		As Authorized l	Date 7/29/2019								
License Expiry Date/EST. ID# Address 10/9/2019 / 7156 29 SPRUCE ST				City / State LEWISTON	/ ME		Zip Code 04240-7319	Telephone 207-786-2529			
Temperature Observations											
Location	Temperature				Notes						
Air temp	39*	Display co	oler								
Water	hand w	ash									
Sliced ham	50*	Deli unit, d	iscarde	ed							
Air temp	49*	House hold	d refrige	erator							
Milk	45*	Oakhurst o	ooler, o	discarded							
Water	140*	2 bay sink									

Person in Charge (Signature)

Health Inspector (Signature) LOUIS LACHANCE To fake

State of Maine Health Inspection Report

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Date

Establishment Name

SPEAKERS SNACK SHACK & VARIETY

License Expiry Date/EST. ID# 10/9/2019 /7156

Address 29 SPRUCE ST City / State LEWISTON

ME

Zip Code 04240-7319

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

7: 3-301.11.(A).(B).(D): C: Food employees are handling ready to eat foods with bare hands.

INSPECTOR NOTES: Employee not wearing gloves or using utensils handling ready to eat foods.

14: 4-601.11.(A): C: Equipment food-contact surfaces and utensils are not clean to sight and touch.

INSPECTOR NOTES: Meat slicer not cleaned after use (2 days prior). Fryolaytor baskets and drainage racks not washed, rinsed or sanitized after daily use.

20: 3-501.16.(A).(2): C: PHF not maintained at 41 F or less.

INSPECTOR NOTES: Multiple coolers have elevated air temperature and product temperature. Potentially Hazardous Foods must be held a 41* or less. Discarded

36: 6-501.111.(C): C: Pests found on premises due to not using proper methods to control them.

INSPECTOR NOTES: Dozens of dead cockroaches found in traps. Live cockroach found on sticky pad. IHH issued. Pictures will be documented on City computer.

43: 4-903.11.(A).(C): N: Single service/ single use items improperly stored or kept in the original package or stored by using other means that afford protection from contamination until used.

INSPECTOR NOTES: Take out containers stored right side up allowing for contamination. All containers need to be inverted to be protected.

45: 4-501.11: N: Equipment in disrepair.

INSPECTOR NOTES: Fryolator appears to be damaged and leaking throughout machine and into containers on floor. Repair, discard or replace.

47: 4-601.11.(B): C: Food contact surfaces of cooking equipment not clean.

INSPECTOR NOTES: Fryolator encrusted in grease. Clean more often and as neccesary.

47: 4-601.11.(C): C: Nonfood contact surfaces are not clean.

INSPECTOR NOTES: Tops of equipment, shelving dirty. Clean more often and as neccesary.

53: 6-501.114: N: The premises is littered / unnecessary equipment and articles present.

INSPECTOR NOTES: Many unused equipment items in kitchen area allowing for harborage conditions and leading to unclean areas. Items not being used must be removed.

53: 6-501.12: N: The physical facilities are not clean.

INSPECTOR NOTES: **REPEAT**Floors, walls and coving areas unclean. Move items in hard to reach areas to clean. areas

Person in Charge (Signature)

Health Inspector (Signature)
LOUIS LACHANCE

Kar Karken

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Date: 7/29/2019

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State of Maine Health Inspection Report

Establishment Name

SPEAKERS SNACK SHACK & VARIETY

License Expiry Date/EST. ID# Address City / State Zip Code 10/9/2019 / 7156 29 SPRUCE ST LEWISTON ME 04240-7319

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

54: 6-501.14.(A): N: Ventilation not clean.

INSPECTOR NOTES: **REPEAT**Ventilation has a large build up of grease. Hire professional exhaust cleaning company to degrease to be code.

Person in Charge (Signature)

Health Inspector (Signature) LOUIS LACHANCE



Date: 7/29/2019

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State of Maine Health Inspection Report Page 5 of 6 Date 7/29/2019

SPEAKERS SNACK SHACK & VARIETY

Establishment Name

License Expiry Date/EST. ID# Address City / State Zip Code 10/9/2019 /7156 29 SPRUCE ST LEWISTON ME 04240-7319

Inspection Notes

**IHH issued due to cockroaches. Establishment is ordered to remain closed until Health Inspector lifts IHH.

Hire Pest Control Company to determine severity of problem and treat to remedy pest problem

Hire professional cleaners to disinfect the entire facility. Professional cleaners must be on the list of 3rd party vendors listed on the State of Maine approved list.

Establishment issued IHH after conduction 20 minutes of a regular inspection. Doors were immeditely locked.

Certified Food Protection Manager: Patricia Speaker exp. 4/6/22

Unless directed otherwise, all Eating Establishments are required to submit a copy of their Certified Food Protection Manager (CFPM) certificate. A CFPM must be hired at the time of a new eating establishment opening or within 60 days of when a CFPM leaves employment. For a list of CFPM courses and trainers go to

http://www.maine.gov/healthinspection/training.htm

Please provide a copy of this certification(s) to Carol Gott, Health Inspection Program, 286 Water St. 3rd Floor, Augusta, ME 04333, carol.gott@maine.gov or faxing to 207-287-3165.

Please include the name of your establishment and the establishment ID# with your certification(s).

Employee Health Policy:

The Health Inspection Program has implemented an educational public health initiative on Employee Health on March 1, 2017. The policy handouts will be provided to you by your inspector and reviewed during inspection for compliance. They are also available on the Program's website: http://www.maine.gov/healthinspection

2013 Maine Food Code Adoption:

The Maine Food Code was adopted in October of 2013. Please refer to our website for a copy, http://www.maine.gov/healthinspection. Following are a few of the major changes: * No Bare Hand Co

http://www.maine.gov/healthinspection. Following are a few of the major changes: * No Bare Hand Contact with Ready-To-Eat Food. * Establishments must have clean-up procedures for employees to follow following vomiting and diarrheal events. * Date marking of Ready-to-eat potentially hazardous foods.

Violation Correction Timeframe:

Critical violations should be corrected on site, but in any event, within 10 days. The licensee must contact Louis Lachance when the critical violation has been addressed at 207-513-3125 extension 3224 or at llachance@lewistonmaine.gov. Non-critical violations must be corrected within 30 days. Failure to satisfactorily correct these violations before the follow-up inspection may result in enforcement proceedings by the Department to include fines and penalties. License renewals can be denied if violations are not corrected within the noted timeframes.

C= Critical violation and NC= Non-critical violation:

"Critical violation" means a provision of the Food Code that, if in non-compliance, is more likely than other violations to contribute to food contamination, illness or environmental health hazard.

Additional Inspection Fee:

License fees provide for two inspections per year. When additional inspections are required, the Department may charge an additional \$100 fee to cover the costs of each additional inspection or visit.

Person in Charge (Signature)

Health Inspector (Signature)

LOUIS LACHANCE

Date: 7/29/2019

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Establishment Name					D <u>ate</u>	7/29/2019		
SPEAKERS SNACK SHACK & VARI	SPEAKERS SNACK SHACK & VARIETY							
License Expiry Date/EST. ID# 10/9/2019 / 7156	Address 29 SPRUCE ST	City / State LEWISTON	ME	Zip Code 04240-7319				

Inspection Notes

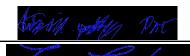
Document Retention/Posting:

Pursuant to the Maine Food Code, the establishment's current license must be displayed. In addition, a sign or placard must be posted in a conspicuous area notifying consumers that a copy of the most recent inspection report is available upon request. CFPM certificates must be posted in a conspicuous area and must be available to the Department upon request.

Person in Charge (Signature)

Health Inspector (Signature)

LOUIS LACHANCE



Date: 7/29/2019